

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	10		5, 29/10
O.I.P.E. CLASSIFIER		10	6-12-01
FORMALITY REVIEW	sha	986	07/23/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

Claim	Date	Claim	Date	Claim	Date
Final		Final		Final	
Original		Original		Original	
1	10/12/01	51		101	
2	10/12/01	52		102	
3	10/12/01	53		103	
4	10/12/01	54		104	
5	10/12/01	55		105	
6	10/12/01	56		106	
7	10/12/01	57		107	
8	10/12/01	58		108	
9	10/12/01	59		109	
10	10/12/01	60		110	
11	10/12/01	61		111	
12	10/12/01	62		112	
13	10/12/01	63		113	
14	10/12/01	64		114	
15	10/12/01	65		115	
16	10/12/01	66		116	
17	10/12/01	67		117	
18	10/12/01	68		118	
19	10/12/01	69		119	
20	10/12/01	70		120	
21	10/12/01	71		121	
22	10/12/01	72		122	
23	10/12/01	73		123	
24	10/12/01	74		124	
25	10/12/01	75		125	
26	10/12/01	76		126	
27	10/12/01	77		127	
28	10/12/01	78		128	
29	10/12/01	79		129	
30	10/12/01	80		130	
31	10/12/01	81		131	
32	10/12/01	82		132	
33	10/12/01	83		133	
34	10/12/01	84		134	
35	10/12/01	85		135	
36	10/12/01	86		136	
37	10/12/01	87		137	
38	10/12/01	88		138	
39	10/12/01	89		139	
40	10/12/01	90		140	
41	10/12/01	91		141	
42	10/12/01	92		142	
43	10/12/01	93		143	
44	10/12/01	94		144	
45	10/12/01	95		145	
46	10/12/01	96		146	
47	10/12/01	97		147	
48	10/12/01	98		148	
49	10/12/01	99		149	
50	10/12/01	100		150	

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

10/12/01
 10/12/01